# The link between anorexia and depression



Anorexia is an eating disorder where people starve themselves. Anorexia usually begins in young people around the onset of puberty. Individuals suffering from anorexia have extreme weight loss. Weight loss is usually 15% below the person's normal body weight. People suffering from anorexia are very skinny but are convinced that they are overweight. Weight loss is obtained by many ways. Some of the common techniques used are excessive exercise, intake of laxatives and not eating.

Anorexics have an intense fear of becoming fat. Their dieting habits develop from this fear. Anorexia mainly affects adolescent girls. It is hypothesized that anorexia causes severe depression that may lead to committing suicide.

### **Review Of literature**

According to J Nerv Ment Dis (1997) this study evaluated the relationship between eating disorder and severity of depression in depressed outpatients before and after antidepressant treatment and assessed the effect of treatment on eating disorder. One hundred thirty-nine outpatients (82 women and 57 men) with major depressive disorder (MDD) filled out the eating disorder inventory (EDI) before and after 8 weeks of treatment with fluoxetine 20 mg/day. Diagnoses of MDD and possible eating disorders were made with the Structured Clinical Interview for DSM-III-R-Patient Edition.

Several EDI subscales correlated significantly with severity of depression both at baseline and endpoint. Additionally, all EDI subscales showed a statistically significant decrease following fluoxetine treatment, and changes in depression severity following treatment were significantly related to changes in EDI, ineffectiveness, perfectionism, and interpersonal distress

subscale scores. These results suggest that several symptoms characteristic of eating disordered patients are linked to the severity of depressive symptoms. Decreases in eating disorder following antidepressant treatment may be related to changes in depressive symptoms.

According to Grubb HJ, Sellers MI, Waligroski K (1993) . To test that women suffering from some form of eating disorder would experience lower self-esteem and higher depression and that women with lower self-esteem and greater depression would rate their attractiveness lower and see themselves as heavier than less depressed individuals, 42 college undergraduate women were individually administered the Eating Disorders Inventory, Beck Depression Inventory, Coppersmith Self-esteem Inventory, and a Body Image/Attractiveness Perception Scale. A Pearson correlation indicated a substantial relation between scores on depression and scores on eating disorders, but non-significant values between self-esteem scores and scores on either eating disorders or on depression. Depression scores correlated significantly with rated body size, but not attractiveness, while self-esteem scores were significantly correlated with rated attractiveness, not body size.

According to Herzog DB, Keller MB, Sacks NR, Yeh CJ, Lavori PW, (1992) . Current and lifetime psychiatric diagnoses were compared in 229 female patients seeking treatment for current episodes of anorexia nervosa (N = 41), bulimia nervosa (N = 98) and mixed anorexia nervosa and Schizophrenia-Lifetime Version, which was modified to include a section for DSM-III-R eating disorders, the Longitudinal Interval Follow-up Evaluation, and the Structured Interview for DSM-III Personality Disorders. Seventy-three percent of the anorexia nervosa subjects, 60% of the bulimia nervosa

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subjects, and 82% of the mixed anorexia nervosa and bulimia nervosa subjects had a current comorbid Axis I diagnosis. Major depression was the most commonly diagnosed comorbid disorder. Low rates of alcohol and substances abuse disorder were diagnosed, and personality disorder occurred in a minority of the sample. The subjects with mixed disorder manifested a higher lifetime prevalence of kleptomania than either the anorexics or the bulimics. High levels of co morbidity were noted across the eating disorder samples. Mixed disorder subjects manifested the most co morbid psychopathology and especially warrant further study.

# Methodology

In my research I'll use a correlational approach as I'm studying the relationship between anorexia and depression and psychological effects. A 15 question survey was constructed to collect My data considering range of items concerning Weight loss, diets, body image, eating disorders, It was distributed on 25 high school and university students The age of the participants ranged from 16 to 22, the participants were high education students the gender composition was all females. The participants arrived at a library a designed studying location they were seated and handed the questionnaire after they were provided by some information about the study and it's aim they took their time and they left and the questionnaire was analyzed and then grouped to study the relation ship between anorexia and depression.

# Results

There were some significant results found, there is a positive relation between anorexia and depression there is association of psychological https://assignbuster.com/the-link-between-anorexia-and-depression/

changes with eating disorders and it was also found that antidepressants improve the eating disorder patients.

## **Discussion**

The results supported the hypothesis and similar studies (J Nerv Ment Dis, 1997.) and (Grubb HJ, Sellers MI, Waligroski K, 1993.) that anorexia is associated with depression because of the feeling patients feel that they are not good looking and they hate their body image and with the treatment of depression the eating disorder is improved.

## **Conclusion**

This study highlighted the relationship between anorexia and depression and that it affects people psychologies and it studied the anti-depressant effect on the improvement of patients' general condition. Depression is related significantly with body image and anorexia causes lower self-esteem.

But there must have been a survey for the anorexic family members to know how their condition through the day is and how they see themselves.

For further researches I suggest a more broad survey includes anorexic patients and family members to get more accurate results that's insure the aim of the study.